SUPPLEMENT TO THE
BRITISH MEDICAL JOURNAL

LONDON SATURDAY FEBRUARY 22 1941

WAR NOTICES

Mobilizing Doctors in an Emergency

In the event of military operations in this country, hospitals and first-aid posts (fixed or mobile) may be required to treat so many civil and military casualties (including in the latter Home Guards) that they will require reinforcement from practitioners not normally attached to them. The Ministry of Health is therefore laying plans for calling upon civilian practitioners in such an emergency. The medical officers of health of certain counties and county boroughs are being asked to get into touch with the appropriate D.D.M.S. or A.D.M.S. of the R.A.M.C., and with the secretaries of Local Medical War Committees, in order to settle so far as possible what duties individual practitioners would be called upon to perform. Normally they would only be asked to assist in their own areas. If necessary, the Ministry's Senior Regional Officers will be empowered to give formal directions to practitioners under the Defence Regulations, but it is anticipated that this course will not usually be necessary.

Medical Attendance on Airmen and Airwomen on Leave

The following Order A.828 has been issued by the Air Ministry concerning medical attendance on airmen and airwomen on leave:

1. In accordance with para. 1400 of K.R. and A.C.I. and the instructions on the reverse of Form 295, it is incumbent on all airmen who fall sick while on leave to report, if practicable, to the nearest naval, military, or Air Force medical establishment or to a civil hospital included under the Emergency Medical or Hospital Schemes of England and Wales, Scotland, or Northern Ireland, showing their passes.

2. Personnel residing more than two miles from a Service medical establishment and unable, owing to their condition, to visit an Emergency Medical Service Civil Hospital although this is within two miles, may make application to a civilian medical practitioner, to whom the instructions on the reverse of Form 295 will be shown, and will immediately inform their unit of any such application.

3. If personnel apply to a civilian medical practitioner when it is practicable to apply to a medical officer of a Service medical establishment or to attend at an Emergency Medical Service Civil Hospital, they will render themselves liable for such expenses as may be incurred.

4. To enable personnel to obtain the name and address of the appropriate Emergency Medical Service Civil Hospital nearest to their place of residence while on leave, arrangements have been made for this information to be obtained on request from officers in charge of local air-raid posts.

5. The provisions of this order apply also to airwomen.

CENTRAL MEDICAL WAR COMMITTEE,
B.M.A. House, Tavistock Square, W.C.1.

The Department of Health for Scotland and the Scottish Section of the British Hospitals Association have agreed on a scheme to attack the problem of waiting lists in Scottish hospitals and infirmaries. In the Government's new emergency hospitals and annexes beds are to be made available for ordinary civilian patients who can properly be treated in a casualty hospital. Medical practitioners will refer patients to the hospital or infirmary where they would have been treated in normal circumstances, and these institutions will admit patients to their own beds where available, nominating other patients for admission to an appropriate casualty hospital. The patients will receive free treatment in casualty hospitals, but the voluntary hospitals through which they are nominated will contribute a small payment on a capitation basis to cover food, drugs, dressings, etc.

MEDICAL WAR RELIEF FUND

ELEVENTH LIST

Previously acknowledged—£16,308 4s. 3d. and £100 3½% Conversion Stock

Individual Subscriptions

£5 5s.—Dr. C. Daniels, London; Dr. M. A. Wiles, Slough.

£3 3s.—Dr. W. A. Barnes, Woburn; Dr. A. Gooding, Carshalton; Dr. D. K. Small, Norwich.

£2 2s.—Dr. F. K. Boston, Oxford; Dr. S. Brass, London.

£1 1s.—Dr. G. J. G. Anderson, London; Dr. Z. M. Dean, London; Dr. E. Greenhalgh, Bramhall, Ches.; Dr. A. F. Page, Handcross, Sussex.

£130.—Practitioners in area of Huddersfield Division—per Dr. W. S. Dickson: Dr. A. L. McCully, £5 5s.; Dr. T. P. Twomey, £5 5s.; Dr. R. S. Park, £5 5s.; Dr. and Mrs. W. Niven, £5 5s.; Dr. and Mrs. W. S. Dickson, £5 5s.; Dr. K. A. Gill, £5; Drs. Maffin and Ogden, £5; Mr. T. H. Edwards, £4 4s.; Dr. E. G. L. Walker, £4 4s.; Dr. J. W. Watthews, £4 4s.; Dr. J. C. Miller, £3 3s.; Mr. C. D. Pye-Smith, £3 3s.; Dr. J. H. Kahn, £3 3s.; Dr. L. K. Kerr, £3 3s.; Dr. W. C. Cresdee, £3 3s.; Dr. H. T. O'Neill, £3 3s.; Mr. M. L. Kennedy, £3 3s.; Mr. W. E. Thompson, £3 3s.; Dr. A. M. Affleck, £3 3s.; Dr. D. F. Barrett, £3 3s.; Mr. W. D. Galloway, £3 3s.; Dr. G. Hirst, £3 3s.; Mr. A. L. Walker, £3 3s.; Dr. D. Guest, £3 3s.; Dr. J. E. Taylor, £3; Dr. J. A. Stephens, £2 2s.; Dr. H. F. Horne, £2 2s.; Dr. J. Sheard, £2 2s.; Dr. W. L. Ingham, £2 2s.; Dr. L. E. Lucas, £2 2s.; Dr. J. F. Smyth, £2 2s.; Dr. S. E. Gawthrop, £2 2s.; Dr. R. Graham, £2 2s.; Dr. G. H. A. Graetz, £2 2s.; Dr. R. Gellatly, £2 2s.; Dr. E. M. Harrison, £2 2s.; Dr. T. B. Bolton, £2 2s.; Dr. H. Mercer, £2 2s.; Dr. D. B. Thomson, £2 2s.; Dr. K. G. Wrigley, £2 2s.; Dr. C. F. J. Carruthers, £2 2s.; Dr. J. Franklin-Adams, £1 1s.

£101 9s. 10d.—The practitioners in the South-Eastern Counties Division—per Dr. Simpson: Dr. H. G. Boswell, £1 1s.; Dr. W. A. Weatherhead, £5 5s.; Dr. A. D. McLean, £1; Dr. R. B. Wilson, £4 4s.; Dr. W. K. Chalmers, £1 1s.; Drs. D. A. R. Haddon and W. K. Henderson, £7 7s.; Dr. R. R. Hair, £2 2s.; Dr. W. M. Martin, £4 4s. (2nd donation); Dr. W. Davidson, £5 5s.; Dr. A. E. Turnbull, £5 5s.; Dr. D. M. Alston, £3 3s.; Dr. L. G. Campbell, £5 5s.; Dr. W. Aitken, £2 2s.; Prof. W. H. Bryce, £1 1s.; Dr. F. O. Taylor, £2 2s.; Dr. G. G. Graham, £1 1s.; Dr. R. Mitchell, £1 1s.; Dr. R. Evans, £5 5s.; Dr. D. L. Frew, £2 2s.; Dr. F. Henderson, £3 3s.; Dr. E. H. Duff, £2 2s.; Dr. A. Temple, £4 4s.; Dr. W. Dobson, £2 2s.; Dr. J. Henderson, £3 3s.; Dr. F. P. Meehan, £2 2s.; Dr. A. Simpson, £5 5s.; Dr. A. D. Turnbull, £2 2s.; Drs. K. McCracken and Crawford, £2 2s.; Dr. T. Scott, £5 5s.; Drs. J. H. Hume, C. S. Nimmo, M. F. Grieve, £10 10s. (The bank charges amounted to 6s. 2d.).

£93 3s.—The practitioners in the area of the East Yorkshire Branch—per Dr. E. M. Dearn: Dr. S. F. Fouracre, £2 2s.; Dr. R. O. Bruce, £5; Dr. D. M. Mackay, £10 10s.; Dr. J. M. Gibson, £5; Dr. H. L. Dowsing, £2 2s.; Dr. W. H. Leonard, £10; Dr. L. Bellman, £2 2s.; Dr. E. R. Keatley, £2 2s.; Dr. W. Murray, £1 1s.; Dr. J. L. Holt, £5 5s.; Dr. R. L. Thornley, £2 2s.; Dr. L. F. Wilson, £2 2s.; Dr. P. C. McKinlay, £5 5s.; Dr. E. E. Laslett, £5; Dr. R. H. Ashwin, £5 5s.; Dr. C. Hortop, £1 1s.; Dr. H. Standring, £1 1s.; Dr. G. Brown, £2 2s.; Dr. M. B. Coleman, £1 1s.; Dr. J. K. Barr, £2 2s.; Dr. I. G. Innes, £5 5s.; Dr. T. M. J. Stewart, £2 2s.; Dr. D. L. M. Tod, £1 1s.; Dr. H. M. Leete, £2 2s.; Dr. D. R. Ferens, £2; Dr. E. M. Dearn, £3 3s.; Dr. G. D. McIver, £1 1s.; Dr. L. I. Hardy, £1 1s.; Dr. T. R. Rodger, £3 3s.

£91 6s.—The doctors on the Edinburgh Panel—per the Clerk, Burgh of Edinburgh Panel Committee.

£55 12s. 9d.—Practitioners in the area of the Dumbartonshire Division.

£43 3s. 6d.—Practitioners in the area of the City of Aberdeen Division (per Dr. Middleton Connon and Dr. D. W. Berry, Hon. Sec.) (amount already sent £90 0s. 6d.): Mr. A. Fowler, £2 2s.; Dr. P. Nicol, £2 2s.; Dr. G. A. Williamson, £1; Prof. W. C. Wilson, £1; Dr. J. A. Mearns, £2 2s.; Dr. J. S. Walker, £5 5s.; Dr. A. G. Anderson, £10 10s.; Dr. T. O. Robson, £2 2s.; Lt.-Col. G. Scott, £2; Dr. D. R. Dugan, £2 2s.; Mr. F. K. Smith, £5 5s.; Dr. J. Brown, £1 1s.; Dr. J. Felgate, 10s. 6d.; Dr. R. F. Twort, £1 1s.; Dr. Jean M. Mackintosh, £1 1s.; Dr. W. J. Raitt, £2 2s.; Dr. Agnes W. Morton, £1 1s.; Dr. J. Scorgie, £1. (The cost of collection was 3s.)

£29 8s.—Practitioners in the Southport area—per Dr. J. C. Russell (amount already sent, £224 11s.): Dr. D. Barbour, £3 3s.; Dr. J. Campbell, £3 3s.; Dr. J. A. Hamilton, £2 2s.; Dr. J. Holmes, £5 5s.; Dr. R. R. M. Porter, £5 5s.; Dr. G. G. Rigby, £2 2s.; Dr. H. Sheldon, £3 3s.; Dr. S. H. Stewart, £5 5s.

£26 5s.—Honorary Surgeons of Manchester Royal Eye Hospital.

£21.—The British Medical Insurance Company of Victoria, Ltd., Melbourne.

£19 19s.—Practitioners in the Shropshire and Mid-Wales Branch area—per Dr. G. Mackie (amount already sent, £89 5s.): Dr. J. A. McClintock, £5 5s. (2nd donation); Dr. E. L. N. Rhodes, £2 2s.; Dr. A. V. Mackenzie, £5 5s.; Mr. D. J. M. Legge, £2 2s.; Dr. S. Legge, £2 2s.; Dr. W. Taylor, £1 1s.; Dr. J. Adams, £2 2s.

£18 10s.—The practitioners in Eastbourne Division—per Dr. E. V. Claydon.

£15 15s.—Per Dr. R. A. Lattey, Torquay (amount already sent, £156 9s.): Dr. H. K. Lacey, £10 10s.; Dr. M. Lees, £5 5s.

£10 10s.—Northamptonshire Medical Charity—per Dr. D. G. Greenfield (amount already sent £434 9s. 6d.): Dr. Eric H. Shaw, £5 5s.; Dr. W. W. Lundie, £5 5s.

£9 9s.—Per Dr. J. M. Johnstone, North Staffs. L.M.W.C. (amount already sent, £736 6s.): Dr. J. W. Crawshaw £4 4s.; Dr. M. E. Cochrane-Dyet, £3 3s.; Dr. J. F. G. Murphy, £2 2s.

£6 6s.—Medical Boards of the North-Western Division—per Dr. E. Martin (amount already sent £738 17s.): Birkenhead—per Dr. Caine, £2 2s.; Oldham—per Dr. Wishart, £2 2s.; Dr. C. Thompson, £2 2s.: Practitioners in the area of the Leigh Division—per Dr. J. H. Young (amount already sent, £40 14s.): Dr. T. E. Fitcroft, £2 2s.; Dr. C. H. T. Thompson, £2 2s.; Dr. J. T. Thompson, £2 2s.

£1 1s.—Surrey Insurance Practitioners—per Dr. A. Lyndon (amount already sent, **£180**): Dr. M. Orr. Per Dr. P. V. Anderson, Bishop Auckland Division (amount already sent, **£23 7s. 6d.**): Dr. J. Bannerman.

£1.—Per Dr. Mabel Ramsay, Plymouth (amount already sent, **£278 4s. 6d.**): Dr. H. C. C. Reid (5th donation).

Local Medical and Panel Committees

£82.—Stirling County.

£21.—Huntingdonshire.

Total—£17,120 16s. 4d. and £100 3½% Conversion Stock

Correspondence

Supply of Practitioners in Australia

SIR,—With reference to the letter from Dr. Kent Hughes (*Supplement*, August 31, 1940, p. 20) concerning country practice in Australia at £500 per annum, I have not seen Sir James Barrett's article to which he refers, so will not comment thereon, but Dr. Hughes is quite right. I do not know who he is or where he lives, but the realism in his letter suggests first-hand experience of recent date, and no other should be trusted.

Even some Australian members of Parliament do not seem to understand that a country practice has overhead expenses, and that these vary between £300 and £400 per annum; what is left out of £500 to keep the family on? Petrol here is now 2s. 10d. per gallon; car, tyres, ether and other drugs are purchased at an enhanced price, and one has to add the local transport. House rent is about the same, but provides a much smaller house than the same rental would give in England. While good food is plentiful, wages are high; no help in the house or surgery could be afforded at £500 p.a. Professional companionship is a rare luxury, and there can be no holidays in a one-man practice, certainly not at £500 p.a., when a locumtenent costs 12 or 14 guineas a week and all expenses. I am referring only to districts south of Perth to Albany in Western Australia. Conditions may be less palatable further north, but I will only write of what I know.

There are some outstanding compensations. A beautiful climate with short bracing winters and a lovely though short spring, a hot dry summer that is nevertheless healthy—a cure for a delicate bronchitic child; colleagues who are most kindly and helpful when you do meet them, though it may be rarely; and patients who are friendly and generously appreciative. Not all of the country districts are treeless; this area is beautifully wooded. Perhaps the greatest gift is a freedom for one's own mind to develop its capabilities; an absence of "panel papers" all day long and time to make original records for one's own use; a hospital to work with and a trained staff in it; professional experience and a chance to improve on this. A high standard of general practice is required, and the general practitioner rises to meet the need; rarely—if he cannot do this—he fails, and there is no practice, no matter how isolated the area.

Anyone coming here should choose his spot carefully; he must be sure of being able to earn more than £500 after his first year before considering any subsidy of that amount, or he will be in debt. Refugee doctors, in their great misfortune, may be willing to accept any condition that will bring food without dishonour; we should not entertain the idea of adjusting our standards of living to those of the refugee—the future harvest of students would be ruined; far better, and much less expensive, to be a railway porter, or, better still, an engine driver at £600 p.a.—I am, etc.,

Mt. Barker, Western Australia, Nov. 30, 1940. O. N. WALKER.

Fees for Diphtheria Immunization

SIR,—For more than a year the B.M.A. scale of fees for injections for immunization against diphtheria has been an obstacle in the way of securing immunization in this area. Four thousand children need to be immunized here. The B.M.A. scale's suggestion of a thousand pounds being payable for this has prevented co-operation between the council and the local general practitioners in getting this good work done. A minor correction of the B.M.A.'s scale of fees would overcome this difficulty. If it were stated that 2s. 6d. per injection should be paid *when the injection is given in the child's home* the anomaly of the charge of 2s. 6d. per injection and the charge of £1 11s. 6d. per clinic at which scores of injections may be given would be removed. Then the busy G.P.'s natural preference for the 2s. 6d. per injection would cease to deter him from co-operation in clinics, and the way would be made clear for G.P.s and the council here to agree that up to two hours of his time in his surgeries each week should be considered as devoted to immunization (provided at least twenty injections were given weekly) by each G.P. in the area. In this way, and no other, will the desired 70% of immunized children in this area be attained quickly.

Stubborn bargaining—explicit or implicit—in matters of life and death is to be deplored. Cannot this reasonable compromise between the B.M.A. and councils of impoverished areas be arranged?—I am, etc.,

Llanbradach, Feb. 8. WILLOUGHBY CLARK.

Consultants Scheme for London

General practitioners in the London area are reminded that the Consultants Scheme, under which consultations may be arranged with consultants and specialists on the Consultants List under prescribed conditions at a fee of one guinea, is, despite the war, still in operation.

Diary of B.M.A. Central Meetings

MARCH

7 Fri. Journal Board, 2 p.m.

B.M.A.: Branch and Division Meetings to be Held

NORTH OF ENGLAND BRANCH.—At Newcastle-upon-Tyne, Thursday, February 27, 2.30 p.m. Mr. L. R. Broster, "Recent Advances in the Surgery of the Adrenal Gland"; 3.45 p.m., Drs. C. N. Armstrong and Lieberman, Clinical demonstration. Members of the Services stationed in the area of the Branch are invited to attend.

SOUTHERN BRANCH: ISLE OF WIGHT DIVISION.—At Parkhurst, Newport, Tuesday, February 25, 2.30 p.m., Surgeon Rear-Admiral R. A. Rowlands, The Treatment of Wound Shock.

YORKSHIRE BRANCH: LEEDS DIVISION.—At Medical School, Tuesday, February 25, 8 p.m. Dr. R. T. Brain: Dermatological Diversions.

Postgraduate News

The Fellowship of Medicine announces the following postgraduate courses for the Final F.R.C.S. examination: (1) neurosurgery, lecture-demonstations, illustrated by slides, pathological specimens, etc., on Tuesdays and Thursdays, at 2.30 p.m., at Medical Society of London, 11, Chandos Street, W., March 4 to 18; (2) orthopaedics (theoretical), lecture-demonstrations, illustrated by *x*-rays, on Wednesdays, at 2.30 p.m., at Medical Society of London, March 26 to April 30; (3) comprehensive course revision at Royal Cancer Hospital, clinical and theoretical teaching, daily, 10 a.m., March 31 to April 25; (4) operative surgery course, thrice weekly, 2 p.m., March 31 to April 25.

WEEKLY POSTGRADUATE DIARY

BRITISH POSTGRADUATE MEDICAL SCHOOL, Ducane Road, W.—*Mon.* to *Fri.*, Special Course on Treatment of Fractures. *Daily*, 10 a.m. to 4 p.m., Medical Clinics, Surgical Clinics and Operations, Obstetrical and Gynaecological Clinics and Operations. *Daily*, 1.30 p.m., Post-mortem Demonstration. *Tues.*, 11 a.m., Paediatric Clinic, Dr. R. Lightwood. *Wed.*, 11.30 a.m., Clinico-pathological Conference (Medical); 2 p.m., Chemotherapy and the Sulphanilamides, III: Bacteriological Aspects, Hon. T. C. Stamp; 3 p.m., Clinico-pathological Conference (Surgical). *Thurs.*, 2 p.m., Radiological Demonstration, Dr. Duncan White. *Fri.*, 2 p.m., Clinico-pathological Conference (Gynaecological).

EDINBURGH POSTGRADUATE LECTURES.—At Edinburgh Royal Infirmary, *Thurs.*, 4.30 p.m. Prof. J. Chassar Moir: The Detection of Pelvic Contractions.

DIARY OF SOCIETIES AND LECTURES

ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, W.C.—Demonstrations. *Mon.*, 3 p.m., Mr. R. Davies-Colley, Inflammation of Bone; *Fri.*, 3 p.m., Dr. A. J. E. Cave, Anatomy of the Cervical Plexus.

ROYAL SOCIETY OF MEDICINE

Section of Odontology.—Mon, 2 p.m. Paper by Dr. E. Wilfred Fish: Benign Neoplasia of Tooth and Bone.

Sections of Medicine and Ophthalmology.—Tues., 2.30 p.m. Discussion: Iridocyclitis. Openers, Col. F. A. Juler (ophthalmology) and Dr. W. D. Wykeham Brooks (medicine).

Section of Psychiatry.—Tues., 2.30 p.m. Presidential Address by Dr. C. P. Symonds: The Neurological Approach to Mental Disorder.

Section of Urology.—Thurs., 3.30 p.m. Clinico-pathological meeting. Specimens by Mr. T. E. Hammond, Mr. A. Wilfrid Adams, Mr. E. W. Riches, Mr. Alex. E. Roche, Mr. Cecil A. Joll, Mr. O. E. J. McOustra, and Mr. H. W. B. Wright.

DAVYHULME MILITARY HOSPITAL MEDICAL SOCIETY.—*Thurs.*, 3 p.m. Discussion: "Burns." To be opened by Major F. I. Evans, R.A.M.C. Medical men and women in any Services (including civilian) will be welcomed.

The Home Office has restored to Dr. Douglas Maxwell of London, N.1, authority to be in possession of and to supply any drug or preparation to which the Dangerous Drugs and the Raw Opium Regulations, 1937, apply.